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# 4. Placement

## 4.1 Legal Requirements For Placement

The following legal protections must be provided to a child in foster care and documented in the child's foster care record. (NOTE: See section 5.4.2 for information regarding Title IV-E placement requirements for an approved placement):

- 4.1.1 THE AGENCY MUST PROVIDE A PLACEMENT THAT IS APPROPRIATE FOR THE CHILD AND MUST DESCRIBE AND DISCUSS THE APPROPRIATENESS OF THE PLACEMENT IN THE SERVICE PLAN.
- 4.1.2 THE AGENCY MUST PLACE THE CHILD IN THE LEAST RESTRICTIVE (MOST FAMILY LIKE SETTING) CONSISTENT WITH THE BEST INTERESTS AND SPECIAL NEEDS OF THE CHILD.
- 4.1.3 THE AGENCY MUST ATTEMPT TO PLACE THE CHILD IN AS CLOSE PROXIMITY AS POSSIBLE TO THE PARENT(S) OR PRIOR CUSTODIAN'S HOME TO FACILITATE VISITATION.
- 4.1.4 THE AGENCY MUST PLACE THE CHILD IN A LICENSED OR APPROVED PLACEMENT. THE AGENCY MUST ENTER INTO A PLACEMENT AGREEMENT WITH THE PLACEMENT PROVIDER (See VDSS Intranet at http://www.localagency.dss.state.va.us/divisions/dfs/fc/forms.cgi for a foster care agreement form)
- 4.1.5 PRIOR TO PLACING A CHILD IN AN EMERGENCY FOSTER HOME OR IN ANY HOME NOT ALREADY APPROVED BY THE LOCAL AGENCY OR A LICENSED CHILD PLACING AGENCY OR WITH RELATIVES INCLUDING PARENTS TO WHOM A CHILD IS TO BE RETURNED, THE LOCAL AGENCY MUST CONDUCT A CRIMINAL BACKGROUND SEARCH AND CHILD ABUSE AND NEGLECT CENTRAL REGISTRY CHECK ON ALL ADULTS RESIDING IN THE HOME IN WHICH THE CHILD IS TO BE PLACED. RESULTS OF THE CHECK MAY PROHIBIT PLACEMENT OF THE CHILD AND IN SUCH CASES, THE BACKGROUND CHECK RESULTS MUST BE SHARED ONLY WITH THE PERSON ON WHOM THE CHECK WAS COMPLETED (§63.2-901.1). The child should not be placed if any of the following are indicated.
  - The parent/guardian/relative/household member has been convicted of any of the following crimes:
    - Murder or voluntary manslaughter, or a felony attempt, conspiracy, or solicitation to commit such an offense against (i) a child of the parent, (ii) a child with whom the parent resided at the time of the offense, or (iii) the other parent of the child.
    - Felony assault or bodily wounding resulting in serious bodily injury or felony sexual assault of (i) a child of the parent or (ii) a child with whom the parent

resided at the time of the offense. Serious bodily injury means bodily injury resulting in substantial risk of death, extreme physical pain, protracted or obvious disfigurement, or protracted loss or impairment of a bodily member, organ, or faculty.

- The following crimes should also be considered a barrier to placement, except under extenuating circumstances:
  - Murder
  - Abduction for immoral purposes (Section 18.2-48)
  - Criminal sexual assault (Title 18.2-61-67.10, Chapter 4, Article 7) and all offenses listed on the Virginia State Police sex offender registry
  - Pandering (Section 18.2-355)
  - Obscenity offenses (Section 18.2-374.1 or 18.2-379)
  - Failing to secure medical attention for an injured child (Section 18.2-371.1 or 18.2-314)
  - Crimes against nature involving children (Section 18.2-361)
  - Taking indecent liberties with children (Section 18.2-370 or 18.2-370.1)
  - Abuse or neglect of children (Section 18.2-371)
  - Felony conviction of a crime against children, including incest (Section 18.2-366)
  - Felony conviction of assault and battery against a family or household member (Section 18.2-57.2 B)
  - Felony convictions for physical assault or battery other than against a family or household member (Section 18.2-51), or drug-related offenses within the past five years.

The local agency has responsibility to protect the safety of each child under its care. Placement decisions should be carefully weighed when criminal and/or abuse/neglect backgrounds are present. State Field Specialists are available for consultation whenever a local department needs guidance and assistance.

- 4.1.7 THE AGENCY MUST DOCUMENT THAT IT PROVIDED EDUCATIONAL AND MEDICAL INFORMATION TO THE FOSTER PARENTS OR PROVIDER AT INITIAL PLACEMENT, EACH TIME A CHILD IS PLACED, AND ON AN ON-GOING BASIS IN ORDER TO ASSURE THAT PROVIDERS HAVE BASIC MEDICAL AND EDUCATIONAL INFORMATION ABOUT THE CHILD. THE AGENCY IS REQUIRED TO PROVIDE THE SERVICE PLAN TO FOSTER CARE PROVIDERS AS A MEANS OF MEETING THIS REQUIREMENT, EXCLUDING THE SECTIONS OF THE PLAN DESCRIBING THE REASONS WHY THE CHILD CANNOT RETURN HOME AND THE ALTERNATIVES CHOSEN.
- 4.1.8 THE AGENCY MAY NOT DELAY OR DENY PLACEMENT OF A CHILD INTO FOSTER CARE ON THE BASIS OF RACE, COLOR, OR NATIONAL ORIGIN OF THE FOSTER PARENTS OR CHILD INVOLVED.
- 4.1.9 IF THE AGENCY DETERMINES IT IS UNLIKELY THE CHILD WILL RETURN TO HIS OR HER PRIOR FAMILY IN A TIMELY MANNER, INFORMATION MUST BE PROVIDED REGARDING THE OPPORTUNITIES FOR PLACING THE CHILD WITH RELATIVES OR IN AN ADOPTIVE HOME (§16.1-281A).

### 4.2 Preplacement Visits

An agency worker must make a preplacement visit to any out-of-home placement to observe the environment where the child will be living. The date of the preplacement visit must be entered in OASIS.

- 4.2.1 The preplacement visit must precede the placement date.
- 4.2.2 The preplacement visit may be any visit to an out-of-home placement by an agency worker up to 90 days prior to placement.
- 4.2.3 An exception to the preplacement visit is an emergency situation, which must be documented in the case narrative. In such emergency situation, a preplacement visit may be the day of placement.
- 4.2.4 When a child is to be placed outside of Virginia with relatives, in a foster home, in an adoptive home, residential facility or an independent living situation, the preplacement visit must be made by an authorized agency in the receiving state in accordance with Interstate/Intercountry Compact procedures.

## 4.3 Foster Family Homes

### 4.3.1 APPROVAL REQUIREMENTS

FOSTER FAMILY HOMES MUST MEET STANDARDS ESTABLISHED BY THE STATE BOARD AND BE APPROVED BY LOCAL DEPARTMENTS PRIOR TO PLACEMENT OF THE CHILD UNLESS THEY ARE HOMES APPROVED BY LICENSED CHILD PLACING AGENCIES. THE PROCEDURES FOR APPROVING THESE HOMES (INCLUDING RELATIVES) ARE FOUND IN Vol. VII, Section I, Chapter I.

HOMES MUST BE RE-EXAMINED FOR APPROVAL EVERY 24 MONTHS.

AN EMPLOYEE OF A LOCAL DEPARTMENT OF SOCIAL SERVICES CANNOT SERVE AS A FOSTER OR ADOPTIVE PARENT FOR CHILDREN IN THE CUSTODY OF THAT AGENCY. (§2.2-3109)

## 4.3.2 MULTIPLE AGENCY FOSTER HOMES

Homes may be providers for more than one agency. The initial approving agency is responsible for continued approval of providers used by more than one agency. (Vol. VII, Section I, Chapter I, 3.11) If the approving agency has a child placed in a shared home, other agencies should obtain prior written approval for each child they wish to place. To avoid possible disruption of a current placement, any time a placement is considered in a shared home where a child has already been placed, discussion should occur between agencies. If there is no child in a shared home, the agency wishing to place a child must discuss the placement with the approving agency and foster parents prior to placement, then provide notification in writing

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about the placement to the approving agency no later than 10 working days from the placement.

### 4.3.3 FOSTER HOMES PROVIDING MULTIPLE TYPES OF CARE

Homes may be providers of regular, emergency and permanent foster care at the same time when:

- The foster parent(s) demonstrate they can handle the different service needs of the children; and
- Services to children in on-going placement are not disrupted by emergency placements.

### 4.3.4 EMERGENCY FOSTER HOME

This is a foster family home where a child may be temporarily placed until a more appropriate placement is found or the home is approved. CHILDREN MAY BE PLACED WITH FRIENDS OR RELATIVES ON AN EMERGENCY BASIS FOR UP TO 30 DAYS WHILE EFFORTS ARE BEING MADE TO APPROVE THE HOME OR LOCATE ANOTHER APPROVED PLACEMENT AS LONG AS STANDARDS FOR EMERGENCY APPROVAL AND REQUIREMENTS FOR A CRIMINAL BACKGROUND CHECK AND CHILD ABUSE AND NEGLECT CENTRAL REGISTRY SEARCH ARE MET (see section 4.1.5). LONGER TERM PLACEMENTS REQUIRE FULL APPROVAL OF THE HOME. Refer to Vol. VII, Section I, Chapter I for additional information.

TITLE IV-E PAYMENTS CANNOT BE MADE FOR CARE IN A HOME THAT DOES NOT FULLY MEET STANDARDS. State-local pool funds must be used for a home during the emergency approval period, if payment is required. Title IV-E cannot pay retroactively for the emergency approval period.

#### 4.3.5 REGULAR FOSTER HOME

This is a foster family home that has been approved and is being paid to provide basic maintenance, supervision, and parenting.

### 4.3.6 RELATIVE FOSTER HOME

This is a foster family home of relatives. THESE HOMES MUST FULLY MEET FOSTER HOME STANDARDS AS LONG AS THE CHILD IS IN FOSTER CARE. CHILDREN MAY BE PLACED WITH RELATIVES ON AN EMERGENCY BASIS FOR UP TO 30 DAYS AS LONG AS STANDARDS FOR EMERGENCY APPROVAL AND REQUIREMENTS FOR A CRIMINAL BACKGROUND CHECK AND CHILD ABUSE AND NEGLECT CENTRAL REGISTRY SEARCH ARE MET (see section 4.1.5). LONGER TERM PLACEMENTS REQUIRE FULL APPROVAL OF THE HOME. (Refer to Vol. VII, Section I, Chapter I.) TITLE IV-E FUNDING CANNOT BE USED DURING THE 30-DAY EMERGENCY APPROVAL PERIOD OF A RELATIVE FOSTER HOME. State-local pool funds must be used, if payment is required.

Relatives residing outside of Virginia must be approved through the Interstate Compact on the Placement of Children prior to placement.

## 4.3.7 SPECIALIZED FOSTER HOME

This is a regular foster family home that has been approved to receive "special needs/specialized" payments in addition to the maintenance payment. Such payments are distributed to regular foster family homes that are not part of a designated therapeutic program. These "special needs/specialized" homes are agency approved foster homes, where the agency has elected to pay an additional service payment due to the difficulty of care of a specific child. The FAPT must authorize "special needs/specialized" payments to a foster family home. This additional payment is paid from CSA state pool funds.

## 4.3.8 THERAPEUTIC FOSTER HOME

This is a trained foster parent, providing care through a licensed child placing agency or local agency's defined foster care therapeutic program, who may receive an additional payment for added daily supervision required for children who have identified emotional/behavioral, developmental, physical or medical disorders. Title IV-E funds may be used to reimburse the costs of daily and additional supervision provided as part of a therapeutic foster home program for IV-E eligible children identified as needing therapeutic foster care. Foster parents providing such therapeutic care must meet specific requirements such as additional training.

The therapeutic needs of a child must be documented in the child's local agency record. Formal assessments, such as Child and Adolescent Functional Assessment Scale (CAFAS) or Preschool and Early Childhood Functional Assessment Scale (PECFAS), which identify the behavior or diagnostic category of the child requiring additional supervision of the foster parents, are instruments that may be used to provide documentation. Additional documentation of the need for therapeutic foster care, which identifies the need for additional supervision, can be provided by the FAPTs recommendation or a history of multiple placements.

## 4.3.9 CHILD PLACING AGENCY FOSTER HOME

This is a foster family home approved by and provided through a private childplacing agency, which does not require local agency approval.

AS WITH AN AGENCY APPROVED FOSTER HOME, THE LOCAL DEPARTMENT OF SOCIAL SERVICES IS RESPONSIBLE FOR:

- COMPLETING THE SERVICE PLAN FOR THE CHILD;
- HOLDING ADMINISTRATIVE PANEL REVIEWS;
- PETITIONING FOR COURT REVIEWS AND HEARINGS; AND

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VISITING THE CHILD at least monthly in the child's home or placement. If
unable to conduct these visits on a monthly basis, face-to-face visits with the
child in his or her home must occur no less than quarterly. These visits should
be planned with the staff of the child placing agency and the foster parents.

The child-placing agency is responsible for submitting quarterly reports on the child to the local department of social services. The report should include a summary of the child's progress in the foster home as well as a summary of services rendered by the foster parents and the child-placing agency.

### 4.3.10 TREATMENT FOSTER CARE PROGRAM HOME

This is a licensed child-placing agency or public agency meeting licensing standards and enrolled by the Department of Medical Assistance Services (DMAS) to provide Medicaid reimbursed Treatment Foster Care case management services for children. These agencies can receive reimbursement through Medicaid for case management for an eligible child, as long as Medicaid criteria are met. Prior to reimbursement for case management services, the local agency must refer the child to a provider; provide copies of the latest CAFAS; and the FAPT assessment. Additionally, either the FAPT certification that treatment foster care case management is medically necessary or written documentation that the CPMT has approved the Treatment Foster Care Case Management Services is required. The local agency must provide the Rate Certification form signed by the CPMT, which identifies the payment rate negotiated with the provider.

The provider must complete and fax preauthorization materials within ten days of placement and submit a monthly Treatment Foster Care Case Management Time Sheet to the local agency. Treatment Foster Care case management reviews must be held every six months by the local agency and ongoing authorization requests must be submitted to the DMAS contractor for continued reimbursement of case management services.

## 4.4 Adoptive Home

This is a home, which has been approved by a private or public agency for the placement of a child with the intent to adopt (§63.2-100). The adoptive home agreement form must be signed in order for the home to be considered an adoptive home. Refer to Vol. VII, Section III, Chapter C and Section I, Chapter I for additional information.

## 4.5 Resource Family Home

A resource family home is used when an agency has developed a concurrent permanency plan of reunification and adoption for a child. The worker should place the child in a resource home where the resource parents will both support the goal of return home and be committed to adopting the foster child if return home is not feasible.

## 4.6 Independent Living Arrangement

An Independent Living Arrangement is a placement of a youth in foster care who is at least 16 years old and lives without daily parental supervision. Such living arrangements may be used for youth who are enrolled in high school, college, vocational training, and/or employment. In determining whether an Independent Living Arrangement is the best plan for a foster youth, some of the factors to consider are the youth's maturity, ability to assume responsibility, and successful progress through his/her transitional living plan.

The worker must make an on-site visit to the living arrangement and approve it, unless the housing arrangement is provided or approved by a college, educational, or other vocational facility. See Independent Living Arrangements, Section 9.7.4.

#### 4.7 Residential Placement

### 4.7.1 <u>DEFINITION AND OBJECTIVES OF RESIDENTIAL PLACEMENT</u>

Residential placement in this section means placement in a licensed publicly or privately owned facility, other than a private family home, where 24-hour care is provided to children separated from their families. These include residential facilities for children, group homes, and psychiatric hospitals.

Residential placement offers care and treatment for children as an alternative to the traditional family environment. Residential programs differ in size, types of children served, staff size and qualification, allowable funding sources, and services provided.

A treatment program in a residential placement should provide individual and group treatment and education for each child to maximize the child's capabilities, further emotional growth and development, and prepare the child to return home, to the community, or a more permanent placement.

## 4.7.2 PREPLACEMENT PLANNING FOR RESIDENTIAL PLACEMENT

Before considering placement in a residential facility, the agency must have:

- ATTEMPTED TO USE COMMUNITY BASED SERVICES AND LESS RESTRICTIVE ALTERNATIVES; I.E. CHILD'S OWN HOME, REGULAR FOSTER HOME, THERAPEUTIC OR SPECIALIZED FOSTER HOME, ETC. This may include referral to the Family Assessment and Planning Team (FAPT) to develop a service plan for community based services;
- COMPLIED WITH LOCAL PROCEDURES FOR RESIDENTIAL PLACEMENT ESTABLISHED BY THE COMMUNITY POLICY AND MANAGEMENT TEAM (CPMT). This may include referring the child to the FAPT. If the CPMT requires staffing by the FAPT for residential placements, the service worker must provide information and supporting documents about the child to the FAPT; and

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 COMPLETED DOCUMENTATION OF THESE PROCESSES IN THE CASE RECORD.

### 4.7.3 MEDICAID FUNDED RESIDENTIAL TREATMENT

To be eligible for Medicaid funding, the local agency and provider must fulfill the following responsibilities prior to admission.

## Agency Responsibilities:

- Refer the child to the facility.
- Prepare Certificate of Need signed by FAPT members.
- An independent physician must certify that outpatient care does not meet the specific needs of the child, proper treatment of the child's condition requires services on an inpatient basis under the direction of a physician, and services can reasonably be expected to improve the child's condition to prevent further regression.
- Provide a copy of the latest CAFAS (within 90 days).
- Coordinate with the facility for the Initial Plan of Care.
- The plan must include the following: diagnosis; symptoms; description of the functional level of the child; treatment objectives with short and long-term goals; orders for medication and treatments; plans for continuing care including reviews; and discharge plans.
- Forward to the receiving facility all relevant background and treatment history.
- Negotiate a reimbursement rate and provide the CPMT signature on the Rate Certification Form.

### Provider Responsibilities:

- Must be certified/enrolled as a Medicaid provider;
- Develop with the agency the Initial Plan of Care;
- Complete the West Virginia Medical Institute preauthorization forms;
- Negotiate a payment rate with locality; and
- Notify CPMT/FAPT of Medicaid approval or denial.

Under Medicaid, reviews must be completed for residential placements every 30 days.

### 4.7.4 SELECTING A RESIDENTIAL PLACEMENT FOR THE CHILD

The primary step in selecting an appropriate residential placement for a child is to compare the child's needs with the services offered by the residential facility. The service worker should involve the child and parent(s) or prior custodian in determining the appropriateness of the residential placement for the child.

Priority shall be given to facilities that provide services to return children to the community.

Factors to consider in determining the appropriate facility should include:

Diagnosis and treatment of child;

- Accessibility of placement to parents or prior custodians;
- The child's and family's readiness for placement and treatment;
- Opportunity for parental/family involvement and participation in the treatment plan;
- Ability of facility to sustain placement;
- Duration of treatment;
- Cost and funding resources; and
- Transition plan to return the child to parent/community.

The agency coordinates the placement with the local school board to assure that the child's educational needs are met.

## 4.7.5 FACILITY REQUIREMENTS

CHILDREN IN CARE SHALL BE PLACED ONLY IN RESIDENTIAL FACILITIES THAT MEET THE FOLLOWING CRITERIA:

- LICENSED BY OR APPROVED AS MEETING THE LICENSING STANDARDS OF THE STATE DEPARTMENT OF SOCIAL SERVICES, OTHER STATE DEPARTMENTS IN VIRGINIA OR THE LICENSING AGENCIES IN THE STATE IN WHICH IT IS LOCATED.
- TITLE IV-E FUNDS MAY BE USED ONLY IN FACILITIES THAT MEET TITLE IV-E requirements AS DESCRIBED IN Section 5.4.2,
- LISTED IN THE CSA SERVICE FEE DIRECTORY UNLESS THE LICENSED FACILITY OFFERS ROOM, BOARD AND SERVICES AT NO CHARGE TO THE AGENCY.
- NOT AMONG THE FACILITIES LICENSED UNDER THE MINIMUM STANDARDS FOR LICENSED CHILD CARING INSTITUTIONS. THE NAMES OF THESE FACILITIES MAY BE OBTAINED FROM THE DIVISION OF LICENSING.
- HAS A PLACEMENT AGREEMENT WITH THE AGENCY.
- DOES NOT PERMIT CORPORAL PUNISHMENT.

### 4.7.6 PREPARING THE CHILD AND FAMILY FOR PLACEMENT

The child and parents should be made fully aware of the reasons for and expectations of the residential placement.

- The child should be prepared for the placement. A preplacement visit to the facility should be arranged to afford the child the opportunity to see the physical facility and meet the staff and peers with whom the child will be residing. An explanation should be given to the child as to why the placement is occurring and how it is anticipated that services provided will help meet the child's needs.
- To prepare the family, the agency should discuss with them how services provided at the residential facility will meet the needs of the child and the family's role in meeting the child's needs through visitation, counseling and/or therapy, as well as participation in the transition plan for the child's return.

## 4.8 Interstate Placements: Interstate Compact On The Placement Of Children (ICPC) (§63.2-1000 et.seq.)

The purpose of the Interstate Compact on the Placement of Children is to ensure that children placed out-of-state are placed in approved settings and receive continuing services and supervision necessary to ensure that their placements are appropriate and safe. Refer to Vol. VII, Section III, Chapter E for specific information on ICPC policy and procedure.

- 4.8.1 LOCAL AGENCIES ARE AUTHORIZED TO PLACE FOSTER CHILDREN OUT-OF-STATE WITH PARENTS, RELATIVES, FOSTER PARENTS OR IN RESIDENTIAL FACILITIES, GROUP HOMES, INDEPENDENT LIVING SITUATIONS, OR CHILD PLACING AGENCY PLACEMENTS UPON RECEIPT OF ICPC APPROVAL FROM BOTH THE Virginia and receiving states' Interstate Office. Placement by the court also requires ICPC approval. While ICPC approval is not required or needed when placing CHILDREN In BOARDING SCHOOLS, MENTAL HEALTH AND MENTAL RETARDATION HOSPITALS AND MEDICAL FACILITIES, and independent living situations, the consent of the Commissioner of the Department of Social Services is required prior to placement. (See 4.8.3 of this section). VISITS UP TO 30 DAYS DO NOT REQUIRE ICPC APPROVAL.
- 4.8.2 To receive ICPC APPROVAL, the agency must submit the 100a form and appropriate supporting documentation as identified in the Interstate Policy chapter, to the Virginia Interstate Office following the procedures for requesting interstate approval found in Vol. VII, Section III, Chapter E. The required forms are available at http://www.localagency.dss.state.va.us/divisions/dfs/icpc.html or by contacting the ICPC Contract Administrator at the Virginia Department of Social Services in Richmond at 804-726-7582 or 7557...
- 4.8.3 IF THE PLACEMENT IS WITH A CHILD PLACING AGENCY, OR IN A GROUP OR RESIDENTIAL FACILITY, in addition to ICPC approval, COMMISSIONER'S CONSENT MUST BE OBTAINED BEFORE ICPC APPROVAL WILL BE GIVEN. (§63.2-1105). Refer to Vol. VII, Section III, Chapter E for information on procedures to obtain Commissioner's Consent. The purpose of Commissioner's Consent is to ensure that no in-state resources exist for the child and that placement out-of-state is in the child's best interests.

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- 4.8.4 PRIOR TO A CHILD IN AGENCY CUSTODY, MOVING WITH A RELATIVE, PARENT OR FOSTER PARENT FROM VIRGINIA TO ANOTHER STATE, REGULATIONS GOVERNING THE INTERSTATE COMPACT MUST BE FOLLOWED (see ICPC Regulation #1, Conversion of Intrastate Placement into Interstate Placement; Relocation of Family Unit at www.dss.state.va.us/family/interstate/pub).
- 4.8.5 ANY AGENCY PLACING A CHILD OUT-OF-STATE WITHOUT MEETING THE ABOVE REQUIREMENTS WILL HAVE ALL EXPENSES RELATED TO THE CHILD CHARGED TO 100% LOCAL FUNDS.
- 4.8.6 When the plan is to permit a foster child to move with a foster parent from Virginia to another country, the Commissioner's consent is required. Refer to Vol. VII, Section III, Chapter E.

#### 4.9 Placements In Another Political Jurisdiction

When a child is to be placed in a home in another political jurisdiction within the state and the local department of social services in that community has not approved that home, the local agency holding custody shall:

- Notify the local agency where the home is located that the home is being considered for the child's placement;
- Conduct a study and approve the home or request that the local agency in the receiving locality study and approve the home;
- Request the local agency in the receiving locality to supervise the child or notify them that the local agency holding custody will supervise; and
- As soon as possible notify the local school division in the new locality as well as the school division the child is leaving.

#### 4.10 When Foster Parents Move To Another Jurisdiction

- 4.10.1 When a child moves with a foster family from one political jurisdiction to another in the state, the local agency holding custody is responsible for continuing supervision of the child unless supervision is transferred to the other local agency. The local agency holding custody shall notify the local agency in the county or city to which the foster family moves.
- 4.10.2 The local agency holding custody must notify the local school division the child is leaving as well as the school division the child will be entering.
- 4.10.3 When supervision is transferred, the agency holding custody codes the case to Foster Care. The agency holding custody is responsible for service plans and completion of OASIS reports.

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## 4.11 Transferring Custody To Another Local Agency

If a local agency is considering transferring custody of a child to another jurisdiction because the parent(s) or guardians have moved to that jurisdiction, a determination must be made that it is in the best interests of the child to transfer custody. The agency holding custody must consult with the local agency in the other jurisdiction prior to petitioning the court to transfer custody. A local agency may petition the court to transfer commitment of a child to the custody of another local agency where the child, his/her parent(s) or guardians, or relatives reside when it is in the best interests of the child to transfer custody. The local board in the other community does not have to accept custody until given reasonable notice and opportunity to be heard by the court.

## 4.12 Notification of Placement Changes

All parents with residual parental rights or prior custodians must be notified in writing of any change in placement or visitation privileges within 10 days of such a change.